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Effective October 1, 2001

Application or Docket Number	
1008644	/

		Lilcot			<u> </u>			┸	<u>/</u>			
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMA TYPE		YTITY	OR	OTHER SMALL		
TOTAL CLAIMS			24				RA	TE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	2 minus 20=		* 4		X\$	9=	3610	<b>D</b> R	X\$18=	
INDEPENDENT CLAIMS			V m	inus 3 = *	* 0		X4	2=	20-	OR	X84=	
MU	ILTIPLE DEPEN	DENT CLAIM P	RESENT				+14	<del></del>		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	TO	TAL	4060	1	TOTAL	
	C	LAIMS AS A	MENDED - PART II				SM	ALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N N	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***	01.414.4	=	X4	2=		OR	X84=	
-	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+14	40=.		OR	+280=	
							ADDIT	OTAL		OB	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)	ADDIT		,		ADDIT: 1 EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RA	TE	'ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N S	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
WE!	Independent	*	Minus	***		=	X4	2=		OR	X84=	
ᄕ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+14	40=		OR	+280=	
							ADDI	OTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)	7001				7,0011.1.22	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQ Q	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
ME	Independent	*	Minus	***		-	X4	2=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		11	<del>1</del> 0=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	*If the "Highest No	mber Previously P Imber Previously F Inber Previously Pa	aid For" IN Th	HIS SPACE is	less tha	ın 3, enter "3."	ADDIT	. FEE	propriate bo	OR x in co	ADDIT. FEE	